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Substitute for forms 1449A/PTO & 1449B/PTO

Examiner

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

| ATTORNEY'S DKT NO. | APPLICATION NO. | | |
|------------------------|-----------------|--|--|
| 003750-039.001 | 10/617,728 | | |
| APPLICANT | | | |
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| FILING DATE | GROUP | | |
| 14 July 2003 | Unassigned | | |

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EXAMINER: Initial if reference considered, whether or not citation is in conformance with M.P.E.P. § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date